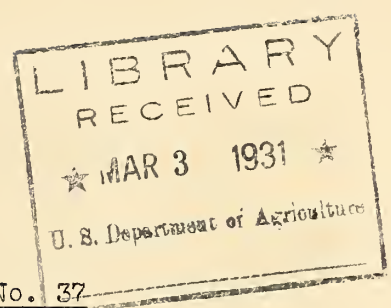


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SAFEGUARDING YOUR FOOD AND DRUG SUPPLY -- No. 37

A radio talk by W. W. Vincent, chief of the western district, Food and Drug Administration, U. S. Department of Agriculture, delivered over KGO, San Francisco, and associated National Broadcasting Company stations, March 5, 1931, at 12:45 P.M.

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Mr. LAMB: Folks, Mr. W. W. Vincent, Chief of the Western District of the U. S. Food and Drug Administration, is here today. Thousands of you are following his food and drug talks and other thousands receive his "Read-the-Label" material every week. Last week, he talked of veterinary preparations and this week his subject is "near-drugs". Tell me, Mr. Vincent, just what is a "near-drug"?

Mr. VINCENT: Well, Mr. Lamb, a "near-drug" is a product that, if sold on its true merit, would be without the scope of the Food and Drugs Act. That law defines "drug" as "any substance or mixture of substances intended to be used for the cure, mitigation or prevention of disease of man or other animal". By "near-drug" I mean such products as hair-removers, freckle-removers, and toilet preparations, including dentifrices and mouth washes. They become drugs only when curative properties for diseases are attributed to them.

Mr. LAMB: So, Mr. Vincent, tooth pastes nowadays would be classed as drugs?

Mr. VINCENT: No, not all of them. You have been reading the magazines and the billboards. The food and drugs act does not govern such advertising. You have not been reading the labels on those tooth paste packages. They don't say much. They tell the truth, or at least they are beginning to tell it. On dentifrices, you may as well forget such claims with respect to curing of disease as come to your attention.

Mr. LAMB: Well, that's news to me. A friend of mine has been trying to cure a mild case of pyorrhea with a tooth paste and partly on my advice.

Mr. VINCENT: Clean teeth are always to be desired, but as for curing pyorrhea, no tooth paste will do it.

Mr. LAMB: Well, I am sorry to hear my advice was not so good. There certainly must be a lot of tooth paste sold each year in this country.

Mr. VINCENT: Well, let's figure. Let's be conservative. There are a hundred and twenty-five million people in the United States. Say 20%, or twenty-five million, use some dentifrice. Each user consumes one package per month. That totals 300,000,000 packages a year. Assuming an average cost per package of 25 cents, the annual expenditure for tooth paste amounts to \$75,-000,000.

Mr. LAMB: Tell me, Mr. Vincent, just what attention has the Food and Drug Administration been giving to tooth pastes and other dentifrices?

Mr. VINCENT: Well, that's quite a story. Recall, I once talked on anti-septics. I told you that within the past three years your Food and Drug Administration had made a chemical and bacteriological examination of more than 1,000 supposed antiseptic preparations and that less than one hundred bore labels to which no exception was taken. In fact, two of the so-called antiseptic preparations actually contained live bacteria and many others would, upon testing, neither kill nor prevent germ growth and, in addition, many carried unwarranted curative claims on the labels. In those 1,000 antiseptic preparations were to be found some dentifrices. Ever since then, your Food and Drug Administration has constantly been giving them attention. Of course, we don't bother with dentifrices which bear no medicinal claims or do not claim to prevent or cure disease. During the past three months, we have had occasion to examine quite a number of these products for which the labels made curative claims. The Federal Notices of Judgment will tell you of the seizures made at various points.

Mr. LAMB: You say the Food and Drug Administration has been causing the seizure of a number of these dentifrices?

Mr. VINCENT: Yes, quite a number. The past three months have seen some 10 different preparations seized in my district alone. The statements on the labels or upon circulars accompanying the product were false and fraudulent. Usually the manufacturer represented his product as a treatment for, or beneficial in pyorrhea. The labelings bore false statements such as "Prevents and Checks Pyorrhea", "Prevents Infection", "Aids in the Treatment of Pyorrhea", "Checks Bleeding Gums", "It Promotes Mouth Health", "Heals Bleeding Gums", "Hardens the Gums", "Good for Tender Gums" and "It Saves the Teeth". As applied to the ordinary tooth paste, powder, or wash, such statements exceed the truth.

Did you know most of these tooth pastes consist essentially of precipitated chalk, soap and glycerine, sometimes with an astringent such as zinc sulphate, perhaps some boron compounds, together with an essential oil flavor and with or without artificial color? Some contain a vegetable gum and some few are sweetened with saccharine. Not very much in that to prevent or cure pyorrhea.

The tooth powders are essentially precipitated chalk, powdered soap, occasionally some soda. Frequently they contain talc--- talcum powder as you know it--- perhaps some boron salts and possibly an astringent such as zinc sulphate or alum. Some are sweetened with saccharine and the majority are flavored.

Mr. LAMB: There doesn't seem to be much medicine in them, does there? Tell me, what are the underlying principles that go to determine the component parts of a tooth paste or powder?

Mr. VINCENT: Well, most manufacturers feel that they should first add an abrasive, such as talc or chalk or volcanic ash. This serves to polish the teeth--- "remove the film", some manufacturers term it. Second, they add a cleansing agent--- a detergent, it is termed. This is represented by the soap. Third, some astringent, such as zinc sulphate, alum, or tannic acid.



may be included. It serves temporarily to contract the tissues. Manufacturers call it hardening the gums. Fourth, an antiseptic property may be added. This at least keeps the product from spoiling. As used in the mouth it has little or no antiseptic value, that is, it will not prevent germ growth. Fifth, palatability is considered. This in large measure influences the sale of such products. The sweetening or flavoring principles added determine its palatability.

Mr. LAMB: Now, what about dentifrices in general. They include all tooth preparations, do they not?

Mr. VINCENT: Well, the word, "dentifrice", comes from the Latin; the word means "rub the tooth". Broadly speaking, it is any powder, paste or liquid used in cleaning the teeth. Manufacturers present you all types. They present them in different manners with various claims. The magazines, the billboards, the radio, carry the messages to save your teeth. Not only would these manufacturers clean your teeth, but they leave you to infer that all your teeth and gum ills will vanish with the use of their tooth paste. You are led to believe that these preparations, in addition to their cleansing qualities, are likewise medicinal in their properties.

Pyorrhea, sometimes called Riggs Disease, is the disease you most frequently see referred to as either prevented or checked or completely remedied by the use of tooth paste. My friends, there has not yet been a tooth powder, paste, or liquid placed upon the market that is a remedy for pyorrhea. I will tell you why.

Medically speaking, pyorrhea is that disease which manifests itself as a pyogenic inflammation of the gums, or as a suppuration of the superficial or surface membrane of the roots of the teeth, which tends to loosen the latter by detaching them from the surrounding tissue. The word, "pyogenic", means to produce pus, as also does the word, "suppuration". Where you have pus you have an infection. Anything that irritates the gums, such as badly fitting crowns, imperfect fillings, rough edges on the teeth, tooth cavities, cuts or abrasions, or tarter on the teeth may cause pyorrhea.

Where pyorrhea has reached the advanced stage, the teeth may become loosened and, to treat the disease effectively, it may become necessary to extract the teeth, clean the infected gums, and perhaps even scrape the jawbone in order to rid the mouth of the accompanying infection. In the early stages, pyorrhea shows itself through tenderness, redness, or swelling of the gums. Frequently, they bleed when touched. The accompanying infection spreads to the bony tissue surrounding the teeth and the teeth decay.

If you suffer from pyorrhea, or are threatened with it, do not rely on a tooth paste or other dentifrice to correct the condition.

Folks, I bear no ill will against any tooth paste manufacturer. All I ask is that he sell his product as a cleansing agent, and under a truthful label. Your Food and Drug Administration requests you to believe only such medicinal claims as may appear upon the label or the circular matter accompanying the package.

According to competent dental surgeons, no tooth paste or mouth wash is capable of curing pyorrhea. This disease centers deeply in the

gums and no surface antiseptic, used as a gargle, wash, or spray, or brushed upon the teeth, can reach the germs that cause it. Suffers from this, and similar mouth diseases, should not rely upon washes, gargles, powders, or tooth pastes.

Some manufacturers assert that their mouth washes and dentifrices kill a certain number of bacteria in a given time, but manufacturers making these claims do not explain that experiments with the antiseptic materials were carried out in the test tube and not in the mouth, and they also fail to state that the conditions in the mouth are not at all similar to those in the laboratory test tube. When one puts foreign material into the mouth, there is an immediate stimulation of the salivary glands. Any antiseptic taken into the mouth would be immediately diluted with mouth secretions, thus making dissimilar the conditions of mouth tests and test-tube tests. In spite of the claims of certain manufacturers that "a considerable variety of germicides, which will destroy in the mouth every organism with which they come in contact, are known at the present time", the prospective buyer should remember that there is no antiseptic nor dentifrice known to science at present that could be expected to reach the deeply seated organisms which cause pyorrhea and related mouth ailments.

This concludes my thirty-seventh talk. If you want this information, or that booklet "Fake Antiseptics and the Law", or the "Read the Label" matter on the many food and drug products of which I have told, a post card to W. W. Vincent, care the station to which you are listening, or U. S. Food and Drug Laboratory, San Francisco, will bring it to you free.